

CLAIMS ONLY							Application Number 10-765 381		Filing Date	
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	1		1				Total Indep			
Total Depend	20		22				Total Depend			
Total Claims	21	7	23				Total Claims			